



Kentucky Transportation Cabinet
Division of Motor Vehicle Licensing
AFFIDAVIT OF CREDITOR IN POSSESSION
[To satisfy lien per KRS 186A.190 (4)]

TC 96-157
08/2008

Any person who knowingly enters or attests to the entry of false or erroneous information in this form will be subject to the penalties of forgery in the second degree and may be subject to the penalties of perjury and theft.

(Attach this form to your Title and Registration application documents and forward to your County Clerk.)

Affidavit Presented to Clerk's Office _____ , _____
(Month & Day) (Year)

Make _____ Year _____ Last License & State No. _____

Vehicle or Hull Identification No. _____ KY No. _____

Motor vehicle or boat has been in my possession since _____ , _____
(Month & Day) (Year)

To Satisfy Lien Per KRS 186A.190(4)

Pursuant to KRS 186A.190(4) a debt has existed in favor of the affiant for charges on such motor vehicle or boat from _____ , _____. The debt has been owed for more than 30 days before providing the
(Month and Day) (Year)
required notices. ☐ Auto Repairs ☐ Auto Body Work ☐ Other (Specify) _____

I certify that the owner of record, _____ ,
whose address is _____ ,
has been notified by certified mail sent _____ , _____ of my intent to obtain a free and
(Month & Day) (Year)
clear title. I certify that all lien holder(s) of record _____ , _____ ,
whose address(es) is (are) _____ ,

_____ has (have) been notified by certified mail (return
receipt attached) _____ , _____ of my intent to obtain a free and clear
(Month Day Year) (Month Day Year)
title. I certify that my intention to obtain title to the vehicle, etc., was published in the form of a legal notice,
copy attached, was published in _____ and was published on
(Name of Publication – statewide circulation required)

_____. I further certify that neither the owner nor the lien holder(s) has objected in
(Dates)
writing to my right to obtain title to the vehicle and that all provisions of KRS 186A.190(4) have been met.

Subscribed and sworn to before me on this _____ day of _____

(Month) (Year)

(Notary Public)

My commission expires _____
(Date)

(Affiant Name)

(Affiant Address)

(Authorized Signature)

(Title)